

RELATIONSHIP BETWEEN HOPE AND PATIENT ACTIVATION IN CONSUMERS WITH SCHIZOPHRENIA

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Patient activation (necessary knowledge and confidence to self-manage one's illness) and hope (goal-directed thinking and action) are both important in managing chronic conditions like schizophrenia. The relationship between hope and patient activation has not been clearly defined. However, hope may be viewed as a motivating factor, providing reason to be involved in treatment. Higher hope then should lead to greater involvement in care and feelings of efficacy in being able to manage illness (patient activation). The purpose of the present study was to understand the relationship between hope and patient activation in a sample of adults with schizophrenia ($n = 119$). This study was a secondary data analysis from a study on Illness Management and Recovery (IMR) – a curriculum-based approach to help people with schizophrenia learn to manage their illness. Data were collected at baseline, prior to any intervention, and at a 9-month follow up. As predicted, patient activation and hope were significantly related with each other showing a strong positive correlation ($r = .57, p < .001$). Comparisons of hope across stages of activation also showed a significant relationship ($F(3,112) = 18.49, p < .001$). Post-hoc comparisons showed that people in the lowest stage of activation had significantly lower hope than the other activation groups. Demographics and background characteristics were not significantly related to patient activation. Longitudinal analyses suggest that hope was a better predictor of subsequent patient activation than the reverse. Our findings underline the importance of recovery based practices and instilling hope as a potential factor getting patients more engaged in treatment.

The research reported here was supported in part by the Department of Veterans Affairs, Veterans Health Administration, Health Services Research & Development Service (IAC 05-254-3; Illness Management and Recovery for Veterans with Severe Mental Illness) and the Undergraduate Research Opportunities Program (UROP).